PUBLIC DISCLOSURE COPY

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

(Rev. January 2020)

▶ Do not enter social security numbers on this form as it may be made public. Open to Public Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, Check if applicable: C Name of organization D Employer identification number Address change Pikes Peak United Way Name change 84-0511799 Initial return Room/suite Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Final return/ termin-ated (719)632-1543518 North Nevada Avenue 4,407,978. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return Colorado Springs, CO 80903 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: Cindy Aubrey for subordinates? Yes X No same as C above H(b) Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ▶ www.ppunitedway.org **H(c)** Group exemption number ▶ **K** Form of organization: X Corporation Trust Association Other > L Year of formation: 1922 M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities: Founded in 1922, Pikes Peak Activities & Governance United Way is dedicated to advancing the common good. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 39 0. 7h **Prior Year Current Year** 3,736,217. $3,573,\overline{253}$ Contributions and grants (Part VIII, line 1h) 8 Revenue 193,191. 648,527. Program service revenue (Part VIII, line 2g) 3,072. 1,683. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 39,239. 140,522. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 4,363,985. 3,971,719. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 2,208,749. 2,119,892. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,340,819. 1,457,710. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 719,784. 655,943. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 4,233,545. 4,269,352. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -297,633. 130,440. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 4,927,178. 5,448,681 Total assets (Part X, line 16) 1,640,749. 2,025,049. 21 Total liabilities (Part X, line 26) 三年 3,286,429. 3,423,632 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Date
Here	Cindy Aubrey, CEO		
	Type or print name and title		
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	Greg Papineau, CPA	Greg Papineau, CPA	10/23/20 self-employed P00294662
Preparer	Firm's name BiggsKofford, P.		Firm's EIN ▶ 84-0884124
Use Only	Firm's address 630 Southpointe	Court, Suite 200	
	Colorado Springs		Phone no. 719. 579. 9090
May the I	RS discuss this return with the preparer shown ab	ove? (see instructions)	X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2019)

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To enhance youth success and family stability in the Pikes Peak Region
	by leading and lifting the most vulnerable in our community with
	mentorships, life resources and real job opportunities. Our signature
	programs and partner agencies intently focus on connecting youth and
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 509,246. including grants of \$) (Revenue \$ 465,190.
	2-1-1 Information and Referral: 2-1-1 is a free, bilingual,
	easy-to-remember three-digit phone number that serves residents of 12
	counties (Alamosa, Conejos, Costilla, Chaffee, Cheyenne, El Paso,
	Lincoln, Mineral, Park, Rio Grande, Saguache, and Teller), helping
	those in need navigate the complex and ever-growing maze of health and
	human service providers in their community. At present, trained
	information specialists staff the hotline from 8a.m. to 5p.m. Monday
	through Friday utilizing a comprehensive database of over 2,500
	resources including federal, state, and local government agencies,
	<pre>private non-profits, as well as faith and community-based</pre>
	organizations. By directing people to the right resources and
	preparing them for their visit, 2-1-1 promotes higher assistance
4b	(Code:) (Expenses \$695,297. including grants of \$) (Revenue \$) (Revenue \$
	Community Impact: If you ask people in the Pikes Peak region about the
	state of our community and its goals, you'll hear a wide variety of
	opinions on what they are and what they should be. The most successful
	community agendas are those based on shared community aspirations and
	objectives developed by citizens, not just "expert" opinions and data
	alone. With that in mind, Pikes Peak United Way continues to listen to
	the community to understand the vision for our region, and what
	obstacles we face to achieving those ambitions. Placing value on both
	expert as well as public knowledge, we will be focusing our efforts on
	three key areas: education, income and health. These are building
	blocks of a good quality of life and the pathways to opportunity. A
	good education paves the way to a career. An adequate income helps
4c	(Code:) (Expenses \$2,119,892. including grants of \$2,119,892.) (Revenue \$97,134. Community Investment: In order to make significant change in a
	community many organizations must work together to support those who
	are in need. Through the Community Investment/Fund Allocations process, Pikes Peak United Way works with and provides funding to 20
	other non-profit agencies that provide services in the areas of
	education, income, and health. High level volunteers are gathered to perform an annual review of the funded partners and recommendations
	regarding the agencies and/or programs viability and distribution of
	funds are presented to the Pikes Peak United Way Board of Trustees.
	Other program convices (Describe on Schodule O.)
40	Other program services (Describe on Schedule O.) (Expenses \$ 123,632 • including grants of \$) (Revenue \$ 3,445 •)
4-	(Expenses \$ 123,632 · including grants of \$) (Revenue \$ 3,445 ·)

Form 990 (2019) Pikes Peak United Way Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	⊢ ′		
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	۳		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		x
40	If "Yes," complete Schedule D, Part IV	"		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	4.	Х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	l	37	
_	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	l	37	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
				-

Form 990 (2019) Pikes Peak United Way
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L. Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes." complete Schedule L. Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			,,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			_ v
05	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		 ^-
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	O.E.L		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(2) organizations. Did the organization make any transfers to an exempt non charitable related organization?	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
0,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	0,		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	4		
b		<u> </u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
			200	

Form 990 (2019) Pikes Peak United Way

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	, , , , , , , , , , , , , , , , , , , ,	2a 24			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e -file (see instructions)				
			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule C		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au	-			37
	financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)?	4a		X
b	If "Yes," enter the name of the foreign country	. (55.15)			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc		- -		v
5a			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	i i	5b		- 25
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		5c		
Ua	any contributions that were not tax deductible as charitable contributions?		6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contribution		- Oa		
b	were not tax deductible?	· ·	6b		
7	Organizations that may receive deductible contributions under section 170(c).		OD.		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and servi	ces provided to the payor?	7a		Х
b			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?	·	7c		Х
d		7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cor	tract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	rt?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	n 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	on file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by	y the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b			9b		
10	Section 501(c)(7) organizations. Enter:	1			
а		10a			
		10b			
11	Section 501(c)(12) organizations. Enter:	.			
		11a			
а	Gross income from other sources (Do not net amounts due or paid to other sources against	116			
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	11b 0412	12a		
	,,	12b	ızd		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
		13b			
С		13c			
			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule	i i	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunera				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment in	ncome?	16		X
	If "Yes," complete Form 4720, Schedule O.				

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response Page 6 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

						X			
Sec	tion A. Governing Body and Management								
					Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14	<u>!</u>					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent	1b	14	Ŀ					
2	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?			2		X			
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision						
	of officers, directors, trustees, or key employees to a management company or other person?			3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 was	filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5		X			
6	Did the organization have members or stockholders?			6		X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	opoint o	one or						
	more members of the governing body?			7a		X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockhol	ders, or						
	persons other than the governing body?			7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by the	following:						
а	The governing body?			8a	X				
b	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched at	the						
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)						
					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napters,	affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before	e filing the form?	11a	X				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to conf	licts?	12b	Х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? $\ensuremath{\mathit{If}}$ "	Yes," de	escribe						
	in Schedule O how this was done			12c	Х				
13	Did the organization have a written whistleblower policy?			13	Х				
14	Did the organization have a written document retention and destruction policy?			14	Х				
15	Did the process for determining compensation of the following persons include a review and approve	al by inc	lependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			15a	X				
b	Other officers or key employees of the organization			15b	X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment wi	th a						
	taxable entity during the year?			16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its pa	articipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ								
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶CO								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990-	T (Section 501(c)(3	s only)	availa	ble			
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request Other (explain								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict o	f interest policy, an	d finan	cial				
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and	records						
	Kim Hoggatt - (719)632-1543	• •							
	518 North Nevada Avenue Colorado Springs CO 809	J.3							

Form 990 (2019)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	not cl	Pos heck i ss per	more rson i	than o	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Jeff Greene	1.00	ļ							•	
Director	1 00	Х						0.	0.	0.
(2) Carlos Melendez	1.00								•	•
Director	1 00	Х				_		0.	0.	0.
(3) Mike Sullivan Chair	1.00	х		х				0.	0.	0.
(4) Randy Bernstein	1.00	T-								
Director		х						0.	0.	0.
(5) Jenifer Furda	1.00									
Director		Х						0.	0.	0.
(6) Betsy Brown	1.00									
Director		Х						0.	0.	0.
(7) Michele Gorr	1.00									
Treasurer		Х						0.	0.	0.
(8) Renee S Congdon	1.00									
Director		Х						0.	0.	0.
(9) Jeff Detra	1.00									
Director		Х						0.	0.	0.
(10) Laura Neumann	1.00									
Director		Х						0.	0.	0.
(11) Matt Vineyard	1.00									
Director		Х						0.	0.	0.
(12) Aram Benyamin	1.00								_	_
Director		Х						0.	0.	0.
(13) Dr. Kenya Lee	1.00									
Director		Х						0.	0.	0.
(14) Liz Price	1.00									
Director	1	Х						0.	0.	0.
(15) Cindy Aubrey	40.00	1						120 004	_	15 050
President/CEO	40.00		\vdash	Х		_		130,094.	0.	17,870.
(16) Deana Hunt	40.00	-		,,				00 071	•	2 056
Senior VP	40.00	-	\vdash	Х	_	-		80,271.	0.	3,956.
(17) Kim Hoggatt	40.00	$\frac{1}{2}$.				74 625	_	0.400
VP Finance	<u> </u>			X	<u> </u>		<u> </u>	74,635.	0.	9,408.

Form **990** (2019)

Par	t VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C	ompensated Employee	s (continued)				
	(A)	(B)			•	C)			(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		1 than d	one	Reportable	Reportable		Es	timate	d
		hours per	box	, unle	ss per	rson i	is both	n an	compensation	compensation			nount o	of
		week		Coi al	iu a u	6010	J. / il uS	(66)	from	from related			other	
		(list any hours for	Individual trustee or director						the	organization			pensat	
		related	or di	e e			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	3C)		om the	
		organizations	ruste	trust		e e	neu		(00-2/1099-101130)				anizati d relate	
		below	dual t	rtiona		nploy	st cor	- h					anizatio	
		line)	ndivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Form(9-		
			_	 	Ť	_	1				\neg			
							_							
											\longrightarrow			
							_				\longrightarrow			
	• • • • • • • • • • • • • • • • • • • •								205 000		0.	2	1 21	2 /
	Subtotal								285,000.		0.	٥.	1,23	0.
	Total from continuation sheets to Part VI								285,000.		0.	3	1,23	
a	Total (add lines 1b and 1c) Total number of individuals (including but n							P		000 of reportable		٠,	1,4.)4.
2	compensation from the organization	ot illilited to tri	ose	IISLE	u al	JOVE	<i>t)</i> WII	io re	eceived more man \$100,	000 of reportable	;			1
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director trust	مو ا	(ev e	mnl	ove	e or	· hia	thest compensated empl	lovee on	ſ			
Ŭ	line 1a? If "Yes," complete Schedule J for si	Ť		•	•	•		•		•	ı	3		Х
4	For any individual listed on line 1a, is the su													
•	and related organizations greater than \$150										I	4		Х
5	Did any person listed on line 1a receive or a													
	rendered to the organization? If "Yes." com	•				•						5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated inc	lepe	nde	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	ensat	tion fro	om	
	the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
	(A)								(B)			(0		
	Name and business	address	N	INC	3			_	Description of s	ervices	C	ompe	nsatior	1
								_						
								\dashv						
2	Total number of independent contractors (in	•	ot lir	nited	d to			ted	above) who received mo	ore than				
	\$100,000 of compensation from the organiz	zation				()						000	

Form 990 (2019) Pikes Peak United Way
Part VIII Statement of Revenue

		Charle if School do O contains a reconomes	ar note to any lin	as in this Dort \/!!!			
		Check if Schedule O contains a response	or note to any lin	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under
							sections 512 - 514
ts ts	1 a	Federated campaigns 1a					
ran	b	Membership dues 1b					
E, G	С	Fundraising events 1c					
Contributions, Gifts, Grants and Other Similar Amounts		Related organizations 1d					
p, e		Government grants (contributions) 1e	206,633.				
Sin		All other contributions, gifts, grants, and		-			
ē Ħ	'		366,620.				
들 된			16,762.	-			
o d	g			2 572 252			
<u>0</u> <u>6</u>	h	Total. Add lines 1a-1f	ì	3,573,253.			
			Business Code				
e	2 a	Program Revenue	900099	571,199.	571,199.		
Ϋ́	b	Fees	624100	77,328.	77,328.		
Se	С						
E S	d						
Beg	e						
Program Service Revenue	f	All other program service revenue					
	'	Total. Add lines 2a-2f	•	648,527.			
$\overline{}$	<u>9</u>			040,3271			
	3	Investment income (including dividends, interest		1,683.			1,683.
	_	other similar amounts)		1,003.			1,003.
	4	Income from investment of tax-exempt bond p					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)	>				
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	h	Less: cost or other basis		-			
a l	D						
Revenue		and sales expenses 7b	+	-			
Š		Gain or (loss) 7c					
		Net gain or (loss)	<u></u>				
her	8 a	Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18	47,332.				
	b	Less: direct expenses 8b	43,993.				
	С	Net income or (loss) from fundraising events		3,339.			3,339.
		Gross income from gaming activities. See					
		Part IV, line 19					
	h						
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a		-			
		Less: cost of goods sold 10	<u>) </u>				
	С	Net income or (loss) from sales of inventory .	<u></u>				
ς l			Business Code				
Ö e	11 a	Miscellaneous Income	624100	128,597.	128,597.		
ane Truck	b	Miscellaneous Fees	624100	8,586.	8,586.		
Miscellaneous Revenue	С						
Sc	d	All other revenue					
Σ	e	Total. Add lines 11a-11d		137,183.			
	12	Total revenue. See instructions	•	137,183. 4,363,985.	785,710.	0.	5,022.

Pai	Part IX Statement of Functional Expenses							
Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	r organizations must con	nplete column (A).				
Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to domestic organizations							
	and domestic governments. See Part IV, line 21	2,119,892.	2,119,892.					
2	Grants and other assistance to domestic							
	individuals. See Part IV, line 22							
3	Grants and other assistance to foreign							
	organizations, foreign governments, and foreign							
	individuals. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors,	297,662.	188,940.	35,379.	73,343.			
•	trustees, and key employees	291,002.	100,940.	33,319.	13,343.			
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)							
7	Other salaries and wages	897,972.	569,983.	106,729.	221,260.			
8	Pension plan accruals and contributions (include	22.,2.24	223,3331		,			
9	section 401(k) and 403(b) employer contributions)							
9	Other employee benefits	165,091.	81,377.	28,691.	55,023.			
10	Payroll taxes	96,985.	61,548.	9,891.	25,546.			
11	Fees for services (nonemployees):	-			-			
а	Management	11,954.		11,954.				
b	Legal							
С	Accounting	19,307.		19,307.				
d	Lobbying							
е	Professional fundraising services. See Part IV, line 17							
f	Investment management fees							
g	` '							
	column (A) amount, list line 11g expenses on Sch O.)							
12	Advertising and promotion	2 270	1 004	F F 1	1 772			
13	Office expenses	3,278.	1,004.	551.	1,723.			
14	Information technology							
15	Royalties	276,361.	151,672.	82,540.	42,149.			
16 17	Occupancy	270,301.	131,072.	02,540.	42,14J•			
18	Payments of travel or entertainment expenses							
10	for any federal, state, or local public officials	5,625.	3,350.	536.	1,739.			
19	Conferences, conventions, and meetings	12,894.	11,164.	285.	1,445.			
20	Interest	,	,		, , , , , , , , , , , , , , , , , , , ,			
21	Payments to affiliates							
22	Depreciation, depletion, and amortization							
23	Insurance	22,533.	11,844.	5,850.	4,839.			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If							
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)							
а	Contract Services	119,552.	107,859.	0.	11,693.			
b	Programs	107,586.	105,034.		2,552.			
С	United Way Worldwide Du	40,870.	27,658.	2,041.	11,171.			
d	Printing	9,501.	2,221.	97.	7,183.			
е	All other expenses	26,482.	4,521.	7,328.	14,633.			
<u>25</u>	Total functional expenses. Add lines 1 through 24e	4,233,545.	3,448,067.	311,179.	474,299.			
26	Joint costs. Complete this line only if the organization							
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation.							
	Check here				Form 990 (2019)			

2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustees, key employee, creator or founder, substantial contributor, or 39% controlled entity or family member of any of these persons 6 Loans and other receivables from their disqualified persons (as defined under section 4958(i)(1)), and persons described in section 4958(c)(3)(8) 6 Lans and other receivables from their disqualified persons (as defined under section 4958(i)(1)), and persons described in section 4958(c)(3)(8) 7 Notes and loans receivable, net 8 Inventionis for sale or use 9 Prepaid expenses and deferred charges 3 33, 692. 9 333, 766 10a Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D 10b Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D 11 Investments - publicy traded securities 12 Investments - cother securities. See Part IV, line 11 13 Investments - cother securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 175, 121. 17 146, 381 18 Grants payable 174, 473, 18 16 174 Accounts payable and accrued expenses 175, 121. 17 146, 381 176 Accounts payable and accrued expenses 177, 1144, 731. 18 1, 046, 999 19 Deferred reverue 10 Accounts payable and accrued expenses 1144, 731. 18 1, 046, 999 10 Escrow or custocial account liability. Complete Part Vi of Schedule D 21 Escrow or custodial account liability. Complete Part Vi of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 39% controlled entity or family member of any of these persons 25 Controlled entity or family member of any of these persons 27 Notes account and the payables to any current or former officer, director, director, and the parties of the	Pai	rt X	Balance Sneet				
1 Cash - non-interest-bearing 189, 632 175, 719 2 Savings and temporary cash investments 570, 382 2 1, 462, 888 3 Pledges and grants receivable, net 570, 382 2 1, 462, 888 4 Accounts receivable, net 570, 382 2 1, 462, 888 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4956(i/i))(iii), and persons described in section 4956(iii)(iii) 6 8 Internotices for sale or use 8 7 9 Prepaid expenses and deferred charges 33, 692 9 33, 766 10a Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D 1, 458, 141 1, 422, 450 10c 1, 375, 795 11 Investments - publicy traded securities 1,615, 827 11 1, 479, 429 12 Investments - cother securities 1,615, 827 11 1, 479, 429 12 Investments - cother securities 1,615, 827 11 1, 479, 429 13 Investments - publicy traded securities 1,615, 827 11 1, 479, 429 14 Intangible assets 1,615, 827 11 1, 479, 429 15 Total assets. Add lines 1 through 15 (must equal line 33) 4, 927, 178 16 5, 448, 681 17 Accounts payable and accrued expenses 1,154, 371 18 1,046, 999 19 Deferred revenue 2 1,048, 749 28 2, 025, 049 19 Deferred revenue 2 2 2 2 2 2 2 2 2			Check if Schedule O contains a response or note to a	ny line in this Part X			
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivable from any current or former officer, director, trustees, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from their disqualified persons (as defined under section 4958(i)(1)), and persons described in section 4958(ic)(3)(8) 8 Inventiories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments - publicy traded securities 11 Investments - other socurities. See Part IV, line 11 12 Investments - other socurities. See Part IV, line 11 13 Investments - publicy traded securities 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 17 Total assets. Add lines 1 through 15 (must equal line 33) 17 Escrow or custodial account liability. Complete Part V of Schedule D 21 Canas and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 28 Secured mortages and notes payable to unrelated third parties 29 Tax excempt bond liabilities 20 Tax excempt thord liabilities on clinical englishes to related third parties 21 Escrow or custodial account liability. Complete Part X of Schedule D 22 Total assets without donor restrictions 29 Total assets without donor restrictions 20 Tax excempt thord the payables to any current or former officer, director, trustee, key employee, creator of founder, substantial contributor, or 35% controlled entity or family member of any of these persons 29 Total l							
2 Savings and temporary cash investments		1	Cash - non-interest-bearing		189,632.	1	175,719.
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(r)(3)(8) 7 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments: publicly traded securities 12 Investments: publicly traded securities 13 (1, 422, 450.) 10c. 1, 375, 795 11 Investments: publicly traded securities 11 Intargible assets 12 Investments: program-related. See Part IV, line 11 13 Investments: program-related. See Part IV, line 11 14 Intargible assets 15 Other assets. Add lines 1 through 15 (must equal line 39) 17 Accounts payable and accrued expenses 17 (and assets. Add lines 1 through 15 (must equal line 39) 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Ecrov or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payable to unrelated thrid parties 23 Secured mortgages and notes payable to unrelated thrid parties 24 Unsecured nortes and loans payable to unrelated thrid parties 25 Other liabilities, Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Through 25 (check here		2			570,382.	2	1,462,888.
5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958()(1)), and persons described in section 4958(c)(3)(8) 7 Notes and loans receivables, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1 Less: accumulated depreciation 1 Investments - publicly traded securities 1 Investments - other securities. See Part IV, line 11 1 Investments - other securities. See Part IV, line 11 1 Investments - other securities. See Part IV, line 11 1 Investments - other securities. See Part IV, line 11 1 Investments - other securities. See Part IV, line 11 1 Investments - program-related. See Part IV, line 11 1 Investme		3				3	518,902.
5 Leans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5		4			59,698.	4	16,083.
controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(h(f)), and persons described in section 4958(c)(3)(B) 8 Inventrories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 12 Investments - special section 10b 1, 458, 141. 1, 422, 450. 10c 1, 375, 795 11 Investments - program-related securities 12 Investments - special securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 11 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 177, 121. 17 1466, 381 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trueste, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 28 Secured mortgages and notes payable to unrelated third parties 29 Other liabilities (including federal income tax, payables to related third parties 20 Other liabilities (including federal income tax, payables to related third parties 21 Cans and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25. 25 26 Total liabilities. Add lines 17 through 25. 27 27 1, 287, 420 28 Nat assets without donor restrictions 29 Organizations that tolow FASB ASC 958, check here 12 and complete lines 27, 28, 32, and 33. 28, 429, 507 31 Retained earnings, endowment, accumulated income, or other funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31 Estained earnings, endowment, accumulated income, or other funds 31 Total		5					
6 Loans and other receivables from other disqualified persons (as defined under section 4958(h(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D 10b 1,458,141. 1,422,450. 10c 1,375,795 11 Investments publicly traded securities 12 Investments - publicly traded securities 13 Investments - other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 17 Accounts payable to only the part IV of Schedule D 20 Tax exempt bond liabilities 21 Excrew or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables			trustee, key employee, creator or founder, substantial	contributor, or 35%			
under section 4958(h(11)), and persons described in section 4958(c)(3)(B)			controlled entity or family member of any of these pers	sons		5	
7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - publicly traded securities 13 Investments - publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10a Land, buildings, and equipment: of such assets and lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 17 Land, 17 Land, 18 Land, 681 18 Grants payable 19 Deferred revenue 10 Land, buildings, 18 Land,		6	Loans and other receivables from other disqualified pe	ersons (as defined			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 33,692. 9 33,766 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 1,458,1411. 1,422,450. 10c 1,375,795 11 Investments - publicly traded securities 11 investments - publicly traded securities 12 investments - publicly traded securities 13 investments - publicly traded securities 14 intrangible assets 15 Other assets. See Part IV, line 11 15 intrangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 4,927,178. 16 5,448,681 17 Accounts payable and accrued expenses 175,121. 17 146,381 18 Grants payable 17 Accounts payable 19 Deferred revenue 10 10 8,563. 19 336,162 12 12 Escrow or custodial account liability. Complete Part IV of Schedule D 12 12 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to any outrent or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to any current of former officer, director, trustee, key employee, creator or fo			under section 4958(f)(1)), and persons described in se		6		
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,833,936.	ι	7	Notes and loans receivable, net			7	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,833,936.	sei	8	Inventories for sale or use			8	
basis. Complete Part VI of Schedule D 10a 2,833,936. b Less: accumulated depreciation 10b 1,458,141. 1,422,450. 10c 1,375,795 11 1	ğ	9	Prepaid expenses and deferred charges		33,692.	9	33,766.
b Less: accumulated depreciation 10b 1,458,141. 1,422,450. 10c 1,375,795 11 Investments - publicly traded securities 1,615,827. 11 1,479,429 12 Investments - other securities. See Part IV, line 11 392,136. 12 386,099 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 4,927,178. 16 5,448,681 17 Accounts payable and accrued expenses 175,121. 17 146,381 18 Grants payable and accrued expenses 1,144,731. 18 1,046,999 19 Deferred revenue 108,563. 19 336,162 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortages and notes payable to unrelated third parties 212,334. 23 495,507 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 27 27 27 27 27 27 27		10a					
11 Investments - publicity traded securities 1			basis. Complete Part VI of Schedule D 10a	2,833,936.			
12 Investments - other securities. See Part IV, line 11 13 13 14 Intangible assets 14 15 16 16 17 16 17 16 17 17		b		<u> </u>			
13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 4 , 927 , 178 · 16 5 , 448 , 681 17 Accounts payable and accrued expenses 175 , 121 · 17 146 , 381 17 Accounts payable and accrued expenses 175 , 121 · 17 146 , 381 17 Accounts payable and accrued expenses 175 , 121 · 17 146 , 381 17 18 1 , 046 , 999 108 , 563 · 19 336 , 162 20 21 22 22 22 22 22 2		11				11	
14		12	Investments - other securities. See Part IV, line 11		392,136.	12	386,099.
15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 4,927,178. 16 5,448,681 17 Accounts payable and accrued expenses 175,121. 17 146,381 18 Grants payable 1,144,731. 18 1,046,999 19 Deferred revenue 108,563. 19 336,162 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 212,334. 23 495,507 24 Unsecured notes and loans payable to unrelated third parties 212,334. 23 495,507 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17.24). Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 1,640,749. 26 2,025,049 27 Total liabilities. Add lines 17 through 25 1,359,620. 27 1,287,420 28 Net assets with odnor restrictions 1,359,620. 27 1,287,420 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 31 31 32 31 32 33,423,632 33,423,		13	Investments - program-related. See Part IV, line 11			13	
16 Total assets. Add lines 1 through 15 (must equal line 33) 4 , 927 , 178		14					
17		15			4 005 150		5 440 601
18 Grants payable							
19 Deferred revenue							
20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 1,640,749 • 26 2,025,049 Organizations that follow FASB ASC 958, check here \[\bar{X} \] and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions 1,359,620 • 27 1,287,420 Organizations that do not follow FASB ASC 958, check here \[\bar{X} \] and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 3,286,429 • 32 3,423,632							
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here					100,303.		330,104.
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23 Sectired mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ▶ X and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 3 1, 286, 429. 32 3, 423, 632	ies	22					
23 Sectired mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ▶ X and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 3 1, 286, 429. 32 3, 423, 632	ij					00	
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ► □ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 3 , 286, 429. 32 3, 423, 632	Lia	22		······	212 33/		195 507
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Corganizations that follow FASB ASC 958, check here ■ X and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions Corganizations that do not follow FASB ASC 958, check here ■ 1,359,620 27 Corganizations that do not follow FASB ASC 958, check here ■ 1,926,809 28 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 3,286,429 32 3,423,632				i	212,334.		473,3076
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 30 And complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here 30 And complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Capital stock or trust principal, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 3 , 286, 429 32 3, 423, 632			. ,	· · · · · · · · · · · · · · · · · · ·		24	
of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ▶ and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ▶ Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 3 , 286, 429. 32 3, 423, 632		23					
Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 1,640,749. 26 2,025,049 1,359,620. 27 1,287,420 1,926,809. 28 2,136,212 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Total net assets or fund balances 3,286,429. 32 3,423,632			• •	i). Complete Fait X		25	
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions		26			1,640,749.		2.025.049.
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 3 2 2, 136 , 212 3 3 2 3 , 423 , 632				re 🕨 🗓			
Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances 1,359,620. 27 1,287,420 1,926,809. 28 2,136,212 2,136,212 30 29 30 30 30 30 30 30 30 30 30 30 30 30 30	es						
28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 4, 927, 178. 33 5, 448, 681	anc	27			1,359,620.	27	1,287,420.
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 4,927,178. 33 5,448,681	Bala		***************************************				2,136,212.
and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 34,927,178.33 5,448,681	<u> </u>						
29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 34,927,178.33 5,448,681	Ē			,			
Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances	Ģ	29	•			29	
31 Retained earnings, endowment, accumulated income, or other funds 31 32 32 3423,632 33 3423,632 3423,63	sets	30					
32 Total net assets or fund balances 3,286,429. 32 3,423,632 33 Total liabilities and net assets/fund balances 4,927,178. 33 5,448,681	As	31				31	
Total liabilities and net assets/fund balances 4,927,178. 33 5,448,681	ét	32			3,286,429.		3,423,632.
	_	33				33	5,448,681.

Га	Neconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)		.,36		
2	Total expenses (must equal Part IX, column (A), line 25)	2 4	.,23		
3	Revenue less expenses. Subtract line 2 from line 1	3	13	0,4	<u>40.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4 3	3,286,429		
5	Net unrealized gains (losses) on investments	5	1	2,8	<u>01.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-	6,0	38.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10 3	,42	3,6	<u>32.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>X</u>
			\Box	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>
			Form	990	(2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Pikes Peak United Way

84-0511799

Pa	rt I	Reason for Public C	Charity Status (All organizations must co	omplete th	is part.) Se	e instructions.	
he	organ	zation is not a private found	ation because it is: (F	or lines 1 through 12, c	heck only	one box.)		
1	$\overline{\Box}$	A church, convention of chu	·		•	-	I)(A)(i).	
2	Ħ	A school described in secti	•				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3	H	A hospital or a cooperative		·			i)	
3	H	•					•	the beenitel's name
4		A medical research organiza	ation operated in cor	ijunction with a nospital	described	III Sectio	n 170(b)(1)(A)(III). Enter	the nospital's name,
		city, and state:						
5		An organization operated for		lege or university owned	or operate	ed by a go	vernmental unit describe	ed in
		section 170(b)(1)(A)(iv). (C	omplete Part II.)					
6		A federal, state, or local gov	ernment or governm	nental unit described in	section 17	'0(b)(1)(A)	(v).	
7	X	An organization that normal	ly receives a substar	ntial part of its support fi	om a gove	ernmental	unit or from the general p	public described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)					
8		A community trust describe	d in section 170(b)(1)(A)(vi). (Complete Par	t II.)			
9		An agricultural research org				ed in coniu	inction with a land-grant	college
_		or university or a non-land-g				-	-	•
		university:	rant conege of agrici	artare (500 morraotions).	Lintor tino i	iarrio, orty	, and state of the conege	, 01
40			lly receives: (1) more	than 22 1/20/ of its supp	oort from o	ontributio	no momborobin foco on	nd aross resoints from
10		An organization that normal						
		activities related to its exem	-					
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Cor						
11	Щ	An organization organized a	and operated exclusi	vely to test for public sa	fety.See	section 50	09(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne function	ns of, or to carry out the	purposes of one or
		more publicly supported org	ganizations describe	d in section 509(a)(1) d	r section (509(a)(2).	See section 509(a)(3).	Check the box in
		lines 12a through 12d that of	describes the type of	supporting organization	n and com	plete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	nization operated, s	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving
		the supported organization	n(s) the power to red	gularly appoint or elect a	maiority o	f the direc	tors or trustees of the su	upportina
		organization. You must c			, ,			
h		Type II. A supporting orga			ion with its	s sunnorte	ed organization(s) by hav	vina
		control or management of						
					arrie persor	iis iiiai coi	ntroi or manage the supp	Jortea
		organization(s). You mus						1 20
С		Type III functionally inte	-				• •	ed with,
	_	its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.	
d			integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)
		that is not functionally into	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and an attentiv	veness
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	nization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.		
f	Ente	r the number of supported o	rganizations					
g		vide the following information		d organization(s).				
	() Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed na document?	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6358281.	6286677.	4272111.	3936103.	4221778.	25074950.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	6358281.	6286677.	4272111.	3936103.	4221778.	25074950.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2438804.
	Public support. Subtract line 5 from line 4.						22636146.
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	6358281.	6286677.	4272111.	3936103.	4221778.	25074950.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	14,524.	34,276.	33,684.	3,072.	1,683.	87,239.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	42,269.	81,344.	36,952.	25,487.		323,235.
11							25485424.
12	Gross receipts from related activities,	•	,			12	418,737.
13	First five years. If the Form 990 is for	~			•		
800	organization, check this box and stop ction C. Computation of Publi	here Der	centage				>
				- L (f))		44	88.82 %
14	Public support percentage for 2019 (li					14	22 22
15	Public support percentage from 2018					15	
10a							
h							
U							. \Box
170	•		• • •				
17 a		ū					*
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h							
,		_					
	,		·				▶ □
18	•			•			
17a	16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ □ 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ □						

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	clow, picase comp	olete i art ii.j				
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						<u> </u>
	(-) 0045	(1.) 0040	(-) 0047	(-1) 0040	(-) 0010	(0 T-1-1
Calendar year (or fiscal year beginning in) ► 9 Amounts from line 6	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 20, 1075						
c Add lines 10a and 10b						
11 Net income from unrelated business						_
activities not included in line 10b,						
whether or not the business is regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
14 First five years. If the Form 990 is fo	r the organization's	s first second thir	d fourth or fifth to	ay year as a sectio	n 501(c)(3) organiza	ation
check this box and stop here	J	, ,	,	•	()()	· —
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2019 (I			column (f))		15	%
16 Public support percentage from 2018					16	%
Section D. Computation of Inves	stment Income	e Percentage				
17 Investment income percentage for 20)19 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18 Investment income percentage from	2018 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2019. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box at	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	>
b 33 1/3% support tests - 2018. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	nd
line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	ınization qualifies a	as a publicly suppo	orted organization	
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	>

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	За		
	3b		
	3с		
	_		
	4a		
	4b		
	4c		
	70		
	5a		
	5b		
	5c		
	6		
	7		
	0		
	8		
	9a		
	9b		
	0-		
	9c		
	10a		
	10b		
n 9	90 or 99	O-EZ)	2019

Pai	T IV Supporting Organizations (continued)			J
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes." explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated.			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instr	uctions)		
2	Activities Test. Answer (a) and (b) below.		Yes	<u>No</u>
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	٥.		
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0		
	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b		
	of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	SO		

Pai	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgai	nizations	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in F	Part VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting orga	anization (see
	instructions).	-		

Schedule A (Form 990 or 990-EZ) 2019

Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		.	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
<u>a</u>	From 2014			
<u> b</u>	From 2015			
<u>C</u>	From 2016			
d	From 2017			
<u> e</u>	From 2018			
f_	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2019 distributable amount			
_ <u>i</u>	Carryover from 2014 not applied (see instructions)			
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2019 distributable amount			
<u> </u>	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-EZ) 2019 Pikes Peak United Way	84-0511799	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a of Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition (See instructions.)	r 17b; Part III, line 12; 1 and 2; Part IV, Section (V, Section B, line 1e; Part	С,
-			
-			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

P	ikes Peak United Way	84-0511799				
Organization type (check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.				
Note: Only a section 501(c		le. See instructions.				
•	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor					
Special Rules						
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, for, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (2) \$5,000; or (3) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the amount of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) \$5,000; or (2) 2% of the greater of (1) 2% of the gr	or 16b, and that received from				
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F n Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F					

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization Employer identification number

Pikes Peak United Way

84-0511799

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$ <u>136,857.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	Total contributions \$ 104,538.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Pikes Peak United Way

84-0511799

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Occash Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Pikes Peak United Way

84-0511799

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer identification number** Pikes Peak United Way 84-0511799 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Pikes Peak United Way

Employer identification number 84-0511799

	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	• •	1
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor ac	dvised funds
_	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor ac		
•	for charitable purposes and not for the benefit of the donor or		
	• •		ı — —
Pa			
1	Purpose(s) of conservation easements held by the organization		,,
	Preservation of land for public use (for example, recreat		n of a historically important land area
	Protection of natural habitat	· —	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the fo	rm of a conservation easement on the last
_	day of the tax year.		Held at the End of the Tax Yea
а			_
b			
С	Number of conservation easements on a certified historic stru		
	Number of conservation easements included in (c) acquired at		
_	listed in the National Register	· ·	
3	Number of conservation easements modified, transferred, rele		
_	year >	, acca, e, aga.eca, e. 10acca e,	and organization dailing the talk
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the peri	•	of
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
	>	-	
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conse	ervation easements during the year
	▶ \$, ,	Ç ,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 1	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•	Yes No
9	In Part XIII, describe how the organization reports conservatio		
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial state	ements that describes the
	organization's accounting for conservation easements.	•	
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statemer	nt and balance sheet works
	of art, historical treasures, or other similar assets held for public	lic exhibition, education, or research in	n furtherance of public
	service, provide in Part XIII the text of the footnote to its financial	cial statements that describes these it	tems.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement ar	nd balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fo	urtherance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under FASB AS		
	Revenue included on Form 990, Part VIII, line 1	_	Α
а	nevenue included of Form 990, Fait viii, line F		

Par	t III	Organizations Maintaining C	ollections of Art	i, Historical Tre	easures, o	r Other	Similar	Assets	(contir	nued)	
3	Using	the organization's acquisition, accession	on, and other records	s, check any of the	following that	make sig	nificant u	se of its	•	ĺ	
	collec	tion items (check all that apply):									
а		Public exhibition	d	Loan or exc	hange progra	am					
b		Scholarly research	е	Other							
С		Preservation for future generations									
4	Provid	de a description of the organization's co	ollections and explain	how they further th	ne organizatio	n's exemp	ot purpos	se in Part	XIII.		
5	During	g the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or othe	er similar a	ssets				
		sold to raise funds rather than to be ma							Yes		No
Par	t IV	Escrow and Custodial Arrang	gements. Comple	ete if the organization	n answered '	"Yes" on F	orm 990	, Part IV, I	ine 9, or		
		reported an amount on Form 990, Par	t X, line 21.								
1a	Is the	organization an agent, trustee, custodi	an or other intermedi	ary for contribution	s or other ass	sets not in	cluded				
	on Fo	rm 990, Part X?							Yes		No
b	If "Ye	s," explain the arrangement in Part XIII	and complete the foll	owing table:							
									Amoun	t	
С	Begin	ning balance					1c				
d	Additi	ons during the year					1d				
е	Distrib	outions during the year					1e				
f		g balance					1f				
2a	Did th	e organization include an amount on Fo	orm 990, Part X, line	21, for escrow or co	ustodial acco	unt liability	y?		Yes		No
		s," explain the arrangement in Part XIII.									
Par	t V	Endowment Funds. Complete i	f the organization an	swered "Yes" on Fo	orm 990, Part	IV, line 10).				
			(a) Current year	(b) Prior year	(c) Two year			ears back			
1a	Begin	ning of year balance	2,689,541.	2,732,354.	 	8,874.	2,3	50,449.	2		419.
b	Contr	ibutions	17,240.	21,936.		3,229.		5,976.			
С	Net in	vestment earnings, gains, and losses	13,149.	81,217.	155	5,692.	2	12,823.		-58,	163.
d	Grant	s or scholarships									
е	Other	expenditures for facilities									
	•	rograms	136,004.	145,966.	44	4,559.	'	70,374.	134,198.		198.
f	Admir	nistrative expenses									
g		f year balance		2,689,541.		2,354.	2,4	98,874.	2	,350,	449.
2		de the estimated percentage of the curr	•	e (line 1g, column (a)) held as:						
а		I designated or quasi-endowment	28.09	_%							
b		anent endowment ▶ <u>71.91</u>	%								
С		· · · · · · · · · · · · · · · · · · ·	%								
	•	ercentages on lines 2a, 2b, and 2c sho	•								
За	Are th	ere endowment funds not in the posse	ssion of the organiza	tion that are held a	nd administer	ed for the	organiza	tion	ſ		_
	by:									Yes	No
		nrelated organizations							3a(i)		X
		elated organizations							3a(ii)		X
		s" on line 3a(ii), are the related organiza							3b		
4 Par		ibe in Part XIII the intended uses of the Land, Buildings, and Equipm		wment funds.							
ı aı	L VI	,		Doubly line dde C	Saa Farra 000	D-4 V 15	10				
		Complete if the organization answered						.1	(-I) D		
		Description of property	(a) Cost or of basis (investment)	` '	t or other (other)		cumulate reciation	a	(d) Boo	k valu	е
			- ` ` 		1,992.	чері	eciation		E1.	1 0	02
						6	E0 6/	10			$\frac{92.}{00}$
		ngs			2,758. 8,706.		58,64 41,10				$\frac{09.}{04.}$
		hold improvements			0,480.		58,39				90.
		ment		7 6	0,400.	1	50,33	, u •	۷.	<u>., U</u>	
	Other								1,37	5 7	9.5
ı otal	. Add l	ines 1a through 1e. (Column (d) must e	<u>qual Form 990, Part)</u>	<u>X. column (B). line 1</u>	<u> ()</u>			<u> </u>	<u> </u>	J , /	<i>y y</i> •

Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value				d-of-year market value
Financial derivatives	.,				
Closely held equity interests	386,099.	End-of-	Year	Market	Value
Other	,				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
G)					
(H)					
al. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	386,099.				
art VIII Investments - Program Related.	30070331				
Complete if the organization answered "Yes"	on Form 990 Part IV line 1:	1c See Form 990	Dart Y I	ine 13	
(a) Description of investment	(b) Book value				d-of-year market value
	(b) Dook value	(0)	74.444.5		. or your manner range
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(8) (9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990	ı, Part X, I	line 15.	
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a)	on Form 990, Part IV, line 1 Description	1d. See Form 990), Part X, l	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a)		1d. See Form 990	ı, Part X, l	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1)		1d. See Form 990	I, Part X, I	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3)		1d. See Form 990), Part X, l	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4)		1d. See Form 990), Part X, l	line 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5)		1d. See Form 990	ı, Part X, I	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5)		1d. See Form 990	, Part X, I	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7)		1d. See Form 990	, Part X, I	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8)		1d. See Form 990	ı, Part X, I	ine 15.	(b) Book value
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) cal. (Column (b) must equal Form 990, Part X, col. (B) line (Column (b) must equal Form 990, Part X, col. (B) line	Description		l, Part X, l	ine 15.	(b) Book value
(a) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The property of the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) (al. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities.	Description			•	
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (b) must equal Form 990, Part X, col. (B) line	Description			•	
(a) (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	Description			•	
(a) I.I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes	Description			•	
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The property of the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2)	Description			•	
(a) (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	Description			•	
(a) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4)	Description			•	
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	Description			•	
(a) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The property of the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	Description			•	
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Description			•	
(9) al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	Description			•	

Pai	TXI Reconciliation of Revenue per Audited Financial Stat		Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin			Т. Т	2 256 504
1				1	3,356,584.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	10 001		
а	Net unrealized gains (losses) on investments		12,801. 166,195.	-	
b	Donated services and use of facilities		166,195.	-	
С	Recoveries of prior year grants			-	
d	Other (Describe in Part XIII.)	2d	-6,038.		
е	Add lines 2a through 2d			2e	172,958.
3	Subtract line 2e from line 1			3	3,183,626.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	11,954. 1,168,405.		
b	Other (Describe in Part XIII.)	4b	1,168,405.		
С	Add lines 4a and 4b			4c	1,180,359. 4,363,985.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Sta)		5	4,363,985.
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	itements With	Expenses per l	Returr	า.
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	ie 12a.			
1	Total expenses and losses per audited financial statements			1	3,219,381.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	166,195.		
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	166,195.
3	Subtract line 2e from line 1			3	166,195. 3,053,186.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				-
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	11,954.		
b	Other (Describe in Part XIII.)	4b	11,954. 1,168,405.		
	Add lines 4a and 4b			4c	1,180,359.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18			5	4,233,545.
Pa	t XIII Supplemental Information.	···			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an			l; Part >	K, line 2; Part XI,
Pai	t V, line 4:				
<u>Paı</u>	t V, Line 4: The Organization's endown	ment prov	ides fundin	ıg to	support
the	Organization's exempt purpose programs	S •			
Paı	t X, Line 2:				
The	Organization follows the guidance cont	cained in	ASC Topic	740-	-10-25,
<u>Ac</u>	ounting for Uncertainty in Income Taxes	s. ASC To	opic 740-10	-25	
pre	scribes a recognition threshold and mea	asurement	attribute	for	financial

statement recognition and measurement of a tax position taken or expected

to be taken. Based on its evaluation, The Organization concluded that

there are no uncertain tax positions that qualify for recognition or

disclosure in the financial statements.

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization	•						ntification number	
	eak United Way					84-0511		
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
Indicate whether the organization rais a	ed funds through any of the following e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	ion of ion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	ustody itrol of	(iv) Gross receipts from activity	to (Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No					
Total			•					
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is	exempt from re	gistration	
CO								

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events Community (add col. (a) through Celebration col. (c)) (event type) (event type) (total number) 4,906. 37,426. 42,332. 1 Gross receipts 2 Less: Contributions 4,906. 37,426. 3 Gross income (line 1 minus line 2) 42,332. 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs _____ 841. 841. 25,315. 25,315. 7 Food and beverages 8 Entertainment 8,178. 8,178. 9 Other direct expenses 34,334. 10 Direct expense summary. Add lines 4 through 9 in column (d) 7,998. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sch	nedule G (Form 990 or 990-EZ) 2019 Pikes Peak United Way 84	-05117	799	Page 3
_	Does the organization conduct gaming activities with nonmembers?			No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	. — •	-	
	to administer charitable gaming?	\	′ es	☐ No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
k	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗀 ነ	′ es	☐ No
	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$			
C	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	🗀 ነ	⁄es	☐ No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Do	organization's own exempt activities during the tax year \$ \$			
Га	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	art III, Iine	es 9, s	9D, 1UD,
_	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	(Form 990 or 990-EZ) Supplemental Infor	Pikes Peak	United	Way	84-0511799	Page 4
Part IV	Supplemental Infor	mation (continued)				

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

2019

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Pikes Pea	k United	Wax					Employer identification number $84-0511799$
Part I General Information on Grants a		мау					04 0311733
 Does the organization maintain records to criteria used to award the grants or assisted. Describe in Part IV the organization's process. 	stance?						
Part II Grants and Other Assistance to					anization answered "	/es" on Form 990 Part	IV line 21 for any
recipient that received more than S					arnzation arioworod	100 0111 01111 000, 1 011	11, 1110 21, 101 411
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Boy Scouts of America, Pikes Peak							
Council Inc - 985 W Fillmore							Support the Charitable
Street - Colorado Springs, CO							Purpose of the
80907-5809	84-0404226	501(c)3	10,000.	0.			Organization
Childrens Literacy Center 2928 Straus Lane, Suite 100 Colorado Springs, CO 80907	84-1209272	501(c)3	10,000.	0.			Support the Charitable Purpose of the Organization
Big Brothers Big Sisters CO PP 111 S. Tejon St., #302							Support the Charitable Purpose of the
Colorado Springs, CO 80903	23-7161796	501(c)3	20,000.	0.			Organization
Catholic Charities of Central CO 228 North Cascade Avenue Colorado Springs, CO 80903-1322	84-0586169	501(c)3	87,500.	0.			Support the Charitable Purpose of the Organization
CO Legal Services 617 S Nevada Ave Colorado Springs, CO 80903	84-0402702	501(c)3	10,000.	0.			Support the Charitable Purpose of the Organization
CASA of the Pikes Peak Region 418 South Weber Street Colorado Springs, CO 80903-2127	84-1115548	501(c)3	30,000.	0.			Support the Charitable Purpose of the Organization
2 Enter total number of section 501(c)(3) a 3 Enter total number of other organizations	nd government or	ganizations listed in th	ne line 1 table				\

Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Court Care for the Pikes Peak							Support the Charitable
Region - 4740 Flintridge Drive,							Purpose of the
#120 - Colorado Springs, CO 80918	45-0488427	501(c)3	13,000.	0.			Organization
			, -				
Greccio Housing Unlimited, Inc							Support the Charitable
1015 E Pikes Peak Avenue Ste 110							Purpose of the
Colorado Springs, CO 80903	84-1158819	501(c)3	10,000.	0.			Organization
Community of Caring Foundation							Support the Charitable
166 E Bennett Ave							Purpose of the
Cripple Creek, CO 80813	84-1481309	501(c)3	30,000.	0.			Organization
Comm Partnership for Child							
Development/Head Start - 2330 West							Support the Charitable
Robinson Street - Colorado							Purpose of the
Springs, CO 80904-3752	84-1071825	501(c)3	90,000.	0.			Organization
Colorado Springs Teen Court							Support the Charitable
224 E Kiowa St							Purpose of the
Colorado Springs, CO 80903	84-1318849	501(c)3	10,000.	0.			Organization
Crossfire Ministries Inc							Support the Charitable
2120 East LaSalle Street							Purpose of the
Colorado Springs, CO 80909-2218	84-1295381	501(c)3	16,000.	0.			Organization
Colorado Springs, co costo 2210	04 1253301	301(0/3	10,000.	· ·			organización —
Homeward Pikes Peak							Support the Charitable
2010 E Bijou Street							Purpose of the
Colorado Springs, CO 80909	13-4242773	501(c)3	10,000.	0.			Organization
•			,				
Diakonia							Support the Charitable
6460 Flying W Ranch Rd							Purpose of the
Colorado Springs, CO 80919-4845	27-2274120	501(c)3	10,000.	0.			Organization
Early Connections Learning Ctr							Support the Charitable
104 East Rio Grande Street							Purpose of the
Colorado Springs, CO 80903	84-0632406	501(c)3	120,000.	0.			Organization

Part II Continuation of Grants and Other	r Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Interfaith Hospitality Network							Support the Charitable
519 N Tejon Street							Purpose of the
Colorado Springs, CO 80903-1109	84-1366832	501(c)3	20,000.	0.			Organization
Energy Resource Center							Support the Charitable
114 W Rio Grande St							Purpose of the
Colorado Springs, CO 80903-4014	84-0809393	501(c)3	10,000.	0.			Organization
Ithaka Land Trust							Support the Charitable
321 Mesa Road							Purpose of the
Colorado Springs, CO 80905-1019	74-2186914	501(c)3	10,000.	0.			Organization
Silver Key Senior Services, Inc							Support the Charitable
1625 S Murray							Purpose of the
Colorado Springs, CO 80916-4502	23-7109922	501(c)3	21,100.	0.			Organization
Lutheran Family Svcs RM-CS							Support the Charitable
108 E St Vrain Ste 21							Purpose of the
Colorado Springs, CO 80903-1161	84-0775550	501(c)3	15,000.	0.			Organization
Fostering Hope							Support the Charitable
3055 Sunnybrook Ln	05.4004000	504 () 0	11 100				Purpose of the
Colorado Springs, CO 80904-1118	26-1991807	501(c)3	11,400.	0.			Organization
Partners in Housing							Support the Charitable
455 Gold Pass Heights							Purpose of the
Colorado Springs, CO 80906-3882	84-1188208	501(c)3	72,000.	0.			Organization
Mt Carmel Center of Excellence							Support the Charitable
530 Communication Cir							Purpose of the
Colorado Springs, CO 80905	81-1652178	501(c)3	40,000.	0.			Organization
Dileas Dark Webitat for Western							Command the Chamite-1-1-
Pikes Peak Habitat for Humanity PO Box 9861							Support the Charitable
	35_1640064	501/a\3	15 000	0.			Purpose of the
Colorado Springs, CO 80932-0861	35-1640064	DOT (C) 2	15,000.	<u> </u>			Organization

Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Scho	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Childrens Hospital CO Foundation							Support the Charitable
PO Box 5585							Purpose of the
Denver, CO 80217-5585	84-0813462	501(c)3	10,000.	0.			Organization
·			,				
Pikes Peak Community Foundation							Support the Charitable
102 s Tejon Street, STE 530							Purpose of the
Colorado Springs, CO 80903-2236	84-1339670	501(c)3	1,800.	0.			Organization
CV. Paradahian							Guarant the Ghandhahla
CU Foundation							Support the Charitable
1420 Austin Bluffs Pkwy							Purpose of the
Colorado Springs, CO 80918		501(c)3	750.	0.			Organization
Pikes Peak or Bust Rodeo							Support the Charitable
Foundation - 601 North Nevada Ave							Purpose of the
- Colorado Springs, CO 80903	84-1589318	501(c)3	10,000.	0.			Organization
eciciado Epringe, eo cosos	01 1303310	301(0)3	10,000.	••			organization
TESSA							Support the Charitable
435 Gold Pass Heights							Purpose of the
Colorado Springs, CO 80906	84-0746803	501(c)3	55,000.	0.			Organization
m							
The Broadmoor World Arena							Support the Charitable
3185 Venetucci Blvd							Purpose of the
Colorado Springs, CO 80906	84-0155150	501(c)3	10,000.	0.			Organization
The Resource Exchange, Inc.							Support the Charitable
418 South Weber Street							Purpose of the
Colorado Springs, CO 80903-2127	84-0532684	501(c)3	50,000.	0.			Organization
eciciade springs, co topos 2127	01 0332001	301(0/3	30,000.	•			
Tri-Lakes Cares							Support the Charitable
235 N Jefferson St							Purpose of the
Monument, CO 80132-9188	74-2501356	501(c)3	25,000.	0.			Organization
United States Association of Blind							Support the Charitable
Athletes - 1 Olympic Plaza -							Purpose of the
Colorado Springs, CO 80909	31-0977121	501(c)3	2,500.	0.			Organization

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Place (Formally Urban Peak Colorado Springs) - 423 E. Cucharras - Colorado springs, CO 80903	84-1549702	501(c)3	35,000.	0.			Support the Charitable Purpose of the Organization
			,				
							0.1

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
t IV Supplemental Information. Provide the information	n required in Part I, line	e 2; Part III, column	n (b); and any other ad	ditional information.	
t I, Line 2:					
ted Way monitors the use of g	rant funds	in the Uni	ited States	by	
rforming periodic on-site moni	toring of t	hese organ	nizations.	On such	
sits, any audited or unaudited	financial	statements	s are revie	wed and the	
e of grant funds examined. Re					
-	Commendatio	ns are gr	ven to the	grantees	
sed on the findings.					

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Pikes Peak United Way

Employer identification number 84-0511799

Additional information on organizations mission
Founded in 1922, Pikes Peak United Way is dedicated to advancing the
common good by not only providing a safety net for basic services, but
also preventing tomorrow's problems by addressing issues today.
Form 990, Part III, Line 1, Description of Organization Mission:
their families to resources at the beginning of their life journey to
ensure access to fundamental needs of food, shelter and learning
resources for all. #strongertogether
Form 990, Part III, Line 4a, Program Service Accomplishments:
success and decreases frustrations. Last year, Pikes Peak United Way
2-1-1 provided life changing information and referrals to nearly 35,000
individuals and families in crisis.
Form 990, Part III, Line 4b, Program Service Accomplishments:
ensure healthy families. Good health helps children succeed at school
and adults at work. Remove any of these three key elements, and the
others collapse. Put them together, and individuals and families and
our community as a whole have a strong foundation for success. Special
emphasis will be placed on youth success and family stability to ensure
that children and families in our region have opportunities for
success.

Name of the organization

Employer identification number

Pikes Peak United Way

Dolly Parton's Imagination Library: Dolly Parton's Imagination Library

promotes early literacy in the home by mailing free, age-appropriate

books each month to each registered child, birth to 5 years old. Pikes

Peak United Way partners with the Dollywood Foundation to bring this

program to El Paso and Teller Counties and is responsible for

registration and enrollment as well as funding the cost of the books,

postage, and mailing within our region. In 2019, over 43,000 books

were sent to children in the Pikes Peak region to begin their home

libraries which helps to ensure that children enter kindergarten with

necessary early literacy skills and an eagerness to learn.

Expenses \$ 94,105. including grants of \$ 0. Revenue \$ 600.

Colorado Springs Promise: The mission of Colorado Springs Promise is to equip and inspire students to strive for a better future and life after high school by promoting education, family involvement, workforce engagement, and community support. With the right path and opportunity, students can maximize their full potential. If we want to create a better life for all, we must focus more support through programs, partnerships and volunteers on historically marginalized or excluded groups and the under-resourced communities in which they often live. In this effort, in 2019, Colorado Springs Promise has provided 267 computers to students without computers in the home, as well as access to resources for low cost internet. We have provided monthly family dinners with resources and education to 537 students and family members. We have provided food through a bi-weekly food distribution to over 10,000 families. We have supported over 700 students through providing resources and equipment for sports teams, holiday events, and college and career readiness classes and mentoring. We know that

Pikes Peak United Way

Childhood is when trajectories are set. They can be changed later but

it becomes much more difficult. We strive to meet children and

families where they are, provide support and inspiration, and help them

shift their trajectories toward a path of great success.

Expenses \$ 28,872. including grants of \$ 0. Revenue \$ 2,845.

Other

Expenses \$ 655. including grants of \$ 0. Revenue \$ 0.

Form 990, Part VI, Section B, line 11b:

A copy of the 990 is provided to the organization's CFO for review before filing. CFO reviews the 990, makes any recommendations and then presents document to the Finance Committee for further review and approval.

Form 990, Part VI, Section B, Line 12c:

All staff, board members, interns, and key volunteers are covered by the conflict of interest statement, and re-sign them every July. In regards to the Board of Directors, if a potential conflict arises, the CEO alerts other board members at that time, the conflict is reviewed and a decision is made within the Board. In regards to staff and interns, the VP of HR (or equivalent position) reviews the conflict and makes the decision with the supervisor. In regards to key volunteers, the VP of HR (or equivalent position) and the Director of Volunteer Resources review the conflict and make that decision.

Form 990, Part VI, Section B, Line 15:

The process for determining the compensation of the organization's officers and senior management team include a review and approval by the Board of

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization	Page 2 Employer identification number
Pikes Peak United Way	84-0511799
Directors during the annual budgeting cycle. Compensation	is compared with
similar personnel for other similar non-profit and for-pro	fit
organizations. Finally, a performance factor is incorpor	ated into the
data.	
Specifically, Pikes Peak United Way's senior management te	am reviewed three
different salary surveys from ADP, Colorado Nonprofit Asso	ciation, and
United Way Worldwide. The Organization took the following	into
consideration when comparing each employee: the actual sal	ary of each
employee vs. the salary shown within the survey, the total	amount of time
the staff person has been on staff, and then the overall p	erformance and
impact of the employee.	
Form 990, Part VI, Section C, Line 19:	_
The organization makes its governing documents, conflict o	f interest
policy, and financial statements available to the public t	hrough the
organization's website and on www.guidestar.org. Any docu	ments that are
not on these sources are available upon request.	
Form 990, Part XI, line 9, Changes in Net Assets:	
Change in Beneficial Interest in Perpetual Trusts	-6,037.
Rounding	-1.
Total to Form 990, Part XI, Line 9	-6,038.
Form 990 Part XII, Line 2c	
The process for overseeing the audit and selecting the aud	it firm has

not changed from prior year.